Holocaust victims are discharged into the community

Judy Siegel-Itzkovich *Jerusalem*

Nearly 50 years after they were first placed in Israeli mental hospitals for psychotic behaviour, hundreds of Jewish survivors of the holocaust will be moved to hostels, homes for the elderly, and other sheltered institutions in the community.

The health ministry is finally implementing a plan for the gradual transfer of many of these patients, who became mentally ill after surviving the cruelties of the Nazi regime during the second world war.

Half of the 800 surviving patients were admitted to hospital soon after their arrival from Europe during the early years of the state, while the rest developed psychoses triggered, or reactivated decades later, by life crises such as a spouse's death, divorce, or illness.

Some "punished themselves" emotionally out of guilt for outliving their relatives. Many of them came without any family at all, their husbands, wives, and children having been pulled from their arms and sent to the gas chambers, shot, or buried alive.

The degree of emotional pressure and illness often varied according to whether they had survived the death camps, forced labour camps, or ghettos; had hidden from the Nazis; or had fled to countries such Britain, Switzerland, Spain, or Russia until the war was over, when they emigrated to Israel.

Israel's psychiatric treatment then was relatively primitive, with a lack of funds, community facilities, and today's modern drugs.

Some activist groups have claimed that a number of the holocaust survivors were not really psychotic but were locked up in mental institutions because the state "misdiagnosed" their conditions or lacked any better place to house them.

Dr Ze'ev Kaplan, head of the ministry's mental health services, denies this, arguing that these patients are now being released into the community because advanced age and, in many cases, dementia have overshadowed the psychotic symptoms in recent years, allowing more appropriate care in non-hospital facilities.

Professor Avner Elizur, a psychiatrist who directs the Abarbanel Mental Hospital near the Mediterranean coast, asserts that it is hard to know which of the patients' psychoses are the result of their traumatic holocaust experiences and which would have occurred naturally in any population.

"Patients with post-traumatic stress disorder soon after their arrival were treated with psychotherapy and medication," Professor Elizur said. "Those with psychoses—schizophrenia, paranoia, depression, and bipolar syndrome—were hospitalised. For many, the institution became their home, but in this they weren't very different from patients who hadn't been through the holocaust."

He adds that some of his patients still have nightmares about Nazis coming to kill them and their families, about undergoing medical experimentation and sterilisation, and about other bitter events from their past. □

EYAL WARSHAVSKY/AP

For many holocaust survivors, the institution became their home

Researchers discover new mutant gene

Uy Hoang, *BMJ*

A new mutant gene that may have a role in the development of many common cancers, including lung and breast cancer, was revealed by scientists last week.

The researchers, from the Institute of Cancer Research in Surrey and the Royal Free Hospital and University College Medical School in London, found the mutated oncogene, which they called Bcl10, in a patient presenting with a B cell lymphoma of the stomach (*Cell* 1999;96:25-34).

They have subsequently found identical mutated oncogenes in a sample of other cancers, including breast, lung, and colonic adenocarcinoma.

Dr Martin Dyer, head of the team from the Institute of Cancer Research, said: "This is only the second gene to be discovered which is implicated in such a large number of cancers. The first was p53, which is abnormal in about 50% of all cancers. Our preliminary results indicate that Bcl10 is contributing to the development of at least as many."

The team has begun work on the action of the gene. It has found that the gene is essential in the pathway of apoptosis (programmed cell death) and is unusually prone to mutation. Cells containing the mutated Bcl10 gene lose the ability to undergo apoptosis and display additional transforming ability.

"At first we thought that the Bcl10 gene behaved in the same way as mutated Bcl2, a mutated gene that prevents cells from dying. However, further analysis of the patient's tumour showed that the defective gene not only prevented apoptosis, but also speeded up the growth of cancerous cells in the tumour, behaving in a way similar to mutated p53," said Dr Dyer.

Scientists now want to document the exact frequency of the mutations in the most common cancers and to characterise the functions of the proteins produced by the gene. □

Antenatal clinics fail HIV mothers

Annabel Ferriman, *BMJ*

The United Kingdom is failing pregnant women because antenatal HIV testing is "a lottery," writes Dr Angus Nicoll of the Public Health Laboratory Service (PHLS) Communicable Disease Surveillance Centre, in the *Journal of Medical Screening* this week (1999;5:170-1).

Most pregnant women who are infected with HIV remain undiagnosed during pregnancy, despite the fact that drug treatment and avoiding breast feeding would reduce the risk of transmitting the infection to their babies to around 1%, he says.

"Even in London, where two thirds of HIV positive births occur, and where routine antenatal testing has been recommended as official policy since 1992, fewer than 30% of HIV positive mothers had their infections diagnosed before giving birth in 1997. Indeed, when previously diagnosed maternal infections were excluded the figure was 13%," Dr Nicoll said.

In France and the United States, where a policy of routine testing with consent operates, the number of new cases of childhood HIV infection and AIDS has fallen dramatically. Given the official policies in these countries, a woman whose child was born infected with HIV could successfully sue if it could be shown that she had not been offered a test, he adds.

Dr Nicoll called for the recommendations for routine antenatal testing, made last year by the Intercollegiate Working Party for Enhancing Voluntary Confidential HIV Testing (a group comprising representatives from the royal colleges, the Department of Health, and the PHLS), to be implemented. □